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## APPLICANTS

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 \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/966,451 09/28/2001 PAT 6,692,959

*none AttB*  
 \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/20/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>AttB</i>	Initials <i>AttB</i>		

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## TITLE

Antisense modulation of IL-1 receptor-associated kinase-4 expression

FILING FEE  RECEIVED 750	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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